

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

10/769226

FILING DATE

APPLICANT(S)

10/76

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT										
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1							91								
2							92								
3							93								
4							94								
5							95								
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8							98								
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49															
50															
TOTAL IND.	5	1	5	1			TOTAL IND.								
TOTAL DEP.	44		27				TOTAL DEP.								
TOTAL CLAIMS	49		32				TOTAL CLAIMS								